City of WHITEWATER		Bloodborne Pathogens Policy			
Owner:	DPW Director	Approving Position:	Common Council	Pages:	9
Issue Date:	04/23/2021	Revision Date:	10/27/2022	Review Date:	
Special Instructions:	OSHA standard 29 CFR 1910.1030				

#### I. POLICY

The purpose of this policy is to provide a comprehensive infection control system, which maximizes protection against infectious disease for all employees and for the public that they serve.

This policy will establish specific procedures that employees should follow to reduce their risk of exposure to infectious diseases. Personal protection equipment (PPE) and procedures that should be followed when handling persons or equipment that may be contaminated by infectious diseases, will also be addressed in this policy.

## II. GUIDELINES

It is the policy of the City of Whitewater that all employees recognize the potential risk of contamination that can occur when dealing with people or property that may be contaminated with an infectious disease. In pursuit of this endeavor, the following exposure control plan (ECP) is provided to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens" <u>https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1030</u>.

## **III. DEFINITIONS**

- A. <u>Biohazard</u>: Any danger, risk or harm resulting from exposure to infectious bacteria, viruses, or other harmful agents or their products.
- B. <u>Body Fluids</u>: Included, but not limited to, body secretions such as blood, semen, saliva, vomit, urine, or feces.
- C. <u>Communicable Disease</u>: Any infectious disease capable of being passed to another person by contact with the infected individual or their body fluids. Communicable diseases include, but are not limited to AIDS (HIV Virus), Hepatitis B, and Tuberculosis.

- D. <u>Contaminated Waste</u>: Any waste which has had contact with any potentially contaminated blood or body fluid, including, but not limited to, soiled gloves, gauze, disposable first aid materials.
- E. <u>Coordinator</u>: The HR Manager, who is in charge of overseeing the implementation and continued use of bloodborne pathogens policy and exposure plan for the City of Whitewater.
- F. <u>Indirect Exposure</u>: Indirect contact with a potentially infected person through inhalation of an airborne virus or bacteria from a cough or sneeze or contact with an object an infected person has previously touched. This would also include a small fluid spill on an employee, excluding any mucous membrane of eye, nose or mouth, or any open wounds.
- G. <u>Sharps</u>: Medical articles, including those that are potentially infectious and that may cause punctures or cuts.
- H. <u>Sharps Container</u>: Leak-proof, puncture resistant container capable of holding contaminated sharp materials such as needles, broken glass, etc. Each container shall be marked appropriately with the red-orange label
- I. <u>Significant Exposure</u>: Direct contact by an employee with the body fluids of another. Direct contact is mucous membrane exposure; i.e., being stuck by a hypodermic needle, knife or other sharp object, contact with an open wound, or through the employees eyes, nose or mouth.
- J. <u>Universal Precautions</u>: All blood or other potentially infectious materials will be considered infectious, regardless of the perceived status of the individual.

#### IV. PROCEDURE

- A. Exposure determination: An employee may reasonably anticipate exposure to blood, body fluids or other potentially infectious materials during emergency medical care to injured or ill persons.
- B. Work Practice Controls
  - 1. Hand-washing is required after contact with a possible infectious environment and shall only be done in rest rooms, or an area where food is not handled. When a sink is unavailable an antiseptic hand towelette shall be used.
  - 2. Leak-proof, puncture resistant sharps containers with appropriate labels and color coding are available for all sharps materials.
    - a. The sharps containers are located in all public restrooms in the Municipal Building, the Armory, the Cravath Lakefront Community Building, the Starin Park Community Building (outside bathrooms only).
    - b. Facility Building Maintenance staff are assigned to safely dispose of sharps.
- C. Prevention
  - 1. Immunizations are available to protect employees from contracting many types of infectious diseases.

- a. The City of Whitewater encourages all employees with a higher probability for exposure (Wastewater) receive immunization for Hepatitis B. The cost of this immunization shall be the responsibility of the City.
- b. Employees with a higher probably for exposure who decline the Hepatitis B immunization shall sign the *Hepatitis B Vaccine Declination Form* provided by the Coordinator.
- c. Employees who have not been immunized against "childhood" diseases such as measles, mumps, and rubella should contact their family physicians to obtain these immunizations.
- 2. Persons with sores, scratches, abrasions, and cuts should take additional precautionary measures to minimize their exposure to infectious diseases.
  - a. The greatest protection against infection is human skin, but even a small scratch or sore may permit a virus or bacteria to enter the body.
  - b. Sores, scratches, abrasions and cuts should be covered with a bandage or dressing when at work. If the bandage or dressing becomes soiled, employees should change it with materials available in a department first aid kit.
- D. Personal Protective Equipment (PPE)
  - 1. Equipment designed to protect an employee from significant or indirect exposures to body fluids (gloves, goggles, mask, gown) should be utilized when handling property and/or persons contaminated with body fluids.
    - a. It is the at-risk personnel's responsibility to notify the Coordinator if they have an allergic sensitivity or size conflict to the supplied equipment (gloves, gowns, booties).
    - b. Upon request, the Coordinator or designee shall supply the employee with alternate equipment.
  - 2. A pocket mask or CPR face shield/barrier mask shall be used whenever one is administering CPR.
  - 3. Bloodborne pathogen/bodily fluid spill kits and first aid kits are available in the following areas:
    - a. Municipal Building Finance Department
    - b. Municipal Building 2<sup>nd</sup> Floor Administration
    - c. Irvin L. Young Memorial Library
    - d. Starin Park Community Building
    - e. Water Utility Building
    - f. Streets/City Garage
    - g. Wastewater Utility Building
    - h. Whitewater Aquatic and Fitness Center
  - 4. Managers/Supervisors shall insure that the PPE kit is readily available and stocked.

- 5. Replacement PPE items can be obtained through the Coordinator or designee.
- E. Precautions for handling and using PPE
  - 1. Remove garments soaked by blood or other infectious materials immediately, or as soon as possible.
  - 2. Roll garments outward, away from body and clothing so as not to be contaminated from the infectious materials on the used PPE.
- F. Contaminated Equipment/Clothing
  - 1. If equipment or vehicles are contaminated with body fluids from any person, whether infected or not, the items shall be disinfected.
    - a. Before leaving work, contaminated equipment shall be placed in appropriate areas for either discarding or decontaminating.
    - b. Contaminated equipment shall not be taken home until it has been decontaminated.
  - 2. All Contaminated clothing shall be removed and placed into red biohazard bags.
    - a. DPW employees should contact their uniform clothing provider to determine how to handle contaminate uniforms.
    - b. Employees who do not have uniforms have the options to have their clothing washed or disposed of.
    - c. Sweatpants, t-shirts, and sweatshirts are available from the police department for employees who need clothing to travel home to get clean clothing.
  - 3. After gloves are removed and disposed of, hands should be cleaned with the alcohol solution, disinfectant wipes, or washed with antiseptic soap and warm water.
- G. Housekeeping
  - 1. Documentation of decontamination, stocking and training will be handled by the Coordinator or designee.
  - 2. Personnel are responsible for ensuring that any equipment is cleaned with appropriate disinfectant and decontaminated immediately after spills or leakage occurs, or as soon as possible.
    - a. Liquid blood and body fluids shall be disinfected and cleaned up with bodily fluid absorbent in the following manner:
      - 1) Gloves and mask shall be worn
      - 2) Bodily fluid absorbent shall be poured over the spill
      - 3) The now solid waste shall be scooped up and disposed in a red biohazard bag.
      - 4) The area will be wiped down with a disinfectant spray or wipe.

- b. In the event bodily fluid absorbent is unavailable the contaminated area shall be cleaned in the following manner:
  - 1. Wearing gloves and mask, blot with a paper towel.
  - 2. Spray with a disinfecting solution.
  - 3. Wipe again with a paper towel.
  - 4. Spray and wipe a second time with the disinfecting solution
  - 5. Paper towels and gloves shall then be placed in a red bio-hazard bag.
- 3. Contaminated items, such as bloodied gauze pads, PPE, paper towels, etc., shall be properly disposed of by placing in a red biohazard bags
- 4. Notify Facility Building Maintenance staff to dispose of the red biohazard bags.
- 5. Sharps, general principles.
  - a. Ensure that sharps boxes are correctly assembled and marked to identify.
  - b. Do not dispose of sharps into anything other than an approved OSHA container.
  - c. Sharp boxes should be wall or trolley mounted using brackets whenever possible.
  - d. Boxes must only be filled to the manufacturer's fill line.
    - 1) When to capacity notify Facility Building Maintenance staff.
    - 2) Facility Building Maintenance staff will follow the contacted disposal company's policy to dispose of the container.
- H. Procedure for Exposure Incidents
  - 1. If an employee believes that they have been exposed to an infectious disease, or a high probability exists, a supervisor shall be notified immediately.
  - 2. If the exposure is determined to be a significant exposure, i.e. eyes, nose, mouth or open wound, the employee shall obtain medical treatment immediately, or as soon as possible.
  - 3. The incident shall be documented on the *Exposure Incident Investigation Report*.
  - 4. If an employee has been exposed to body fluids, a supervisor, a physician or the city's legal advisor shall ask the person who is the source of the suspected exposure to submit to a blood test as soon as practical.
- I. Post exposure evaluation and follow-up:
  - 1. In the event of a significant exposure incident, the procedures listed below are to be followed:
    - a. A written opinion by the evaluating health care professional stating that the exposed employee has been informed of the results of the evaluation and about any treatment is included in the employee's confidential medical records.

- b. The health care professional shall have a copy of that evaluation mailed to the HR Manager, who will then place the evaluation into the employees file.
- J. Training
  - 1. All new personnel shall receive Bloodborne Pathogens training within the first month of hire
  - 2. All personnel shall have available a copy of the Bloodborne Pathogens Policy.
  - 3. All department personnel shall have a confidential medical file maintained by the HR Manager.
  - 4. The Manager or designee shall maintain all training records regarding the personnel attending the training.
- V. REPORTING
  - A. The *Hepatitis B Vaccine Declination Form* will be completed by those employees at a higher risk who decline the Hepatitis B vaccine.
  - B. The *Exposure Incident Investigation Report* will be completed for all exposure incidents immediately
- VI. JOB AIDS
  - A. Bloodborne Incident Checklist



# **HEPATITIS B VACCINE DECLINATION (MANDATORY)**

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to myself. However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Employee Name Printed

Employee Signature

Date: \_\_\_\_\_

# City of Whitewater Exposure Incident Investigation Form

Date of Incident:	Time of Incident:				
Location:					
Witness:					
Potentially Infectious Materials Involved:					
Туре:	Source:				
Circumstances (what was occurring at the time of the incident):					
How was the incident caused (accident, equipment malfunction, etc. List any tool, machine, or equipment involved):					
Personal protective equipment being used at the time of the incident:					
Actions Taken (decontamination, clean-up, reporting, etc.):					
Workman's Comp Form Completed: Yes Recommendations for avoiding repetition of incident:					
Supervisor notification:					
Date: Time:	Signature:				
Comments from discussion:					

Copies to: Human Resources & Employee File



Bloodborne Incident Checklist

- Call 911
- Grab bloodborne kit and first aid kit
- Put on gloves and mask. Gown is optional depending on severity of the incident
- When the incident is over, complete the following:
  - Clean and disinfect area and equipment
  - Remove all contaminated PPE and clothing
  - Place all contaminated items in a red biohazard bag
  - Clean hands
  - Notify supervisors or manager of incident
  - Contact Facility Building Maintenance staff to remove contaminated items in red biohazard bags
  - Complete *Exposure Incident Investigation Form* and forward to HR Department